

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</small>		Attorney Docket No. 0838.1009		<i>Box Statement</i>	
		First Named Inventor or Application Identifier		Laurie J. Ozelius	
		Express Mail Label No.		EL564266194US	
Title of Invention		Torsin, Torsin-Related Genes and Methods of Detecting Neuronal Disease			
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231		
1. <input type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>			6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i>		
2. <input checked="" type="checkbox"/> Specification Total pages 141 <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to microfiche Appendix - Background of the Invention - Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claim(s) - Abstract of the Disclosure 			7. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Computer Readable Copy b. <input checked="" type="checkbox"/> Paper Copy (identical to computer copy) 36 Pages c. <input checked="" type="checkbox"/> Statement verifying identity of above copies 		
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 25 <input checked="" type="checkbox"/> Formal <input type="checkbox"/> Informal <input checked="" type="checkbox"/> Fig. of the Drawings for Publication <input type="checkbox"/>			ACCOMPANYING APPLICATION PARTS		
4. <input type="checkbox"/> Oath or Declaration/POA [Total Pages 1] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> [NOTE Box 5 below] <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b). 			8. <input type="checkbox"/> Assignment Papers (cover sheet & documents) <input checked="" type="checkbox"/> Assignee - The General Hospital Corporation Boston, Massachusetts		
5. <input type="checkbox"/> Incorporation By Reference <small>(useable if Box 4b is checked)</small> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.			9. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>		
			10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>		
			11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
			12. <input type="checkbox"/> Preliminary Amendment		
			13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>		
			14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) status still proper and desired		
			15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>		
			16. <input type="checkbox"/> Nonpublication Request <i>(check parent application)</i>		
			17. <input type="checkbox"/> Other:		
18. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09/461,921 Prior application information: Examiner: Einsmann, J Group Art Unit: 1655					
19. CORRESPONDENCE ADDRESS					
NAME		Doreen M. Hogle, Esq. HAMILTON, BROOK, SMITH & REYNOLDS, P.C.			
ADDRESS		Two Militia Drive			
CITY	Lexington	STATE	MA	ZIP CODE	02421-4799
COUNTRY	USA	TELEPHONE	(781) 861-6240	FAX	(781) 861-9540
Signature		<i>Doreen M. Hogle</i>		Date	<i>January 26, 2001</i>
Submitted by Typed or Printed Name		Doreen M. Hogle, Esq.		Reg. Number	36,361

Date: January 26, 2001

EXPRESS MAIL LABEL NO. EL564266194US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Laurie J. Ozelius and Xandra O. Breakefield

Title: Torsin, Torsin-Related Genes and Methods of Detecting Neuronal Disease

TRANSMITTAL OF SEQUENCE LISTING IN COMPUTER READABLE FORM
IN COMPLIANCE WITH 37 C.F.R. §§1.821(e) AND (f)

Box Sequence
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is a copy of the "Sequence Listing" in computer readable form as required by 37 C.F.R. §1.821(e). As required by 37 C.F.R. §1.821(f), Applicant's Attorney hereby states that the content of the "Sequence Listing" in paper form and of the computer readable form of the "Sequence Listing" are the same.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Doreen M. Hogle
Doreen M. Hogle, Esq.
Registration No. 36,361
Telephone (781) 861-6240
Facsimile (781) 861-9540

Lexington, Massachusetts 02421-4799

Date: January 26, 2001

0072105-012501